AL Board of Licensure for Professional Geologists 610 S. McDonough Street Montgomery, AL 36104 (334) 269-9990

Consumer Complaint Form

Name of C	Geologist or Co	mpany	-	Your Name			
Address			-	Your Address			
City	State	Zip	-	City	State	Zip	
Telephone	;		-	Telephone (Home)	(V	Vork)	
Date of Se	ervices Rendere	d	-	How did you learn about the complainant			
Please exp solve the p		circumstan	ces surroundi	ng your complaint inclu	ıding youi	r attempts to	
Signature			-	Date	Date		